

## COMBINED DECLARATION AND POWER OF ATTORNEY

I, **Stuart A. Thompson**, hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and joint inventor, together with **Martin Blaser** and **Joel Dworkin**, of the subject matter which is claimed and for which a patent is sought under 35 U.S.C. 371 on the invention entitled, **Method of Delivering Antigens for Vaccination with a Live Vector**; the specification of which was filed January 30, 1998 as PCT/US98/01780 and which claims benefit of priority under 35 U.S.C. 119(e) of US provisional application 60/036,321 filed January 31, 1997.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **Dr. Benjamin Adler**, Registration No. 35,423. Address all telephone calls to **Dr. Benjamin Adler** at telephone number 713/777-2321. Address correspondence to **Dr. Benjamin Adler**, **McGREGOR & ADLER, LLP**, 8011 Candle Lane, Houston, TX 77071.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

300 Full Name of Inventor: Stuart A. Thompson

Inventor's Signature: Stuart A. Thompson Date: 9/9/99

Residence: 890-A North Belair Rd., Evans, Georgia 30809 GA

Citizen of: United States of America

Post Office Address: 890-A North Belair Rd., Evans, Georgia 30809

## COMBINED DECLARATION AND POWER OF ATTORNEY

I, Joel Dworkin, hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and joint inventor, together with Martin Blaser and Stuart A. Thompson, of the subject matter which is claimed and for which a patent is sought under 35 U.S.C. 371 on the invention entitled, Means for Delivering Antigens for Vaccination with a Live Vector; the specification of which was filed January 30, 1998 as PCT/US98/01780 and which claims benefit of priority under 35 U.S.C. 119(e) of US provisional application 60/036,321 filed January 31, 1997.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Dr. Benjamin Adler, Registration No. 35,423 Address all telephone calls to Dr. Benjamin Adler at telephone number 713/777-2321. Address correspondence to Dr. Benjamin Adler, McGREGOR & ADLER, LLP, 8011 Candle Lane, Houston, TX 77071.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

200 Full Name of Inventor: Joel Dworkin, M.D., Ph.D.

Inventor's Signature: [Signature] Date: 8/6/99

Residence: 718 Evans Ave., Kirkwood, MO 63122 MO

Citizen of: United States of America

Post Office Address: 718 Evans Ave., Kirkwood, MO 63122

09355793-092199